

CONTINUOUS QUALITY IMPROVEMENT (CQI)



Adult Protective Services

Our Vision: To prevent and reduce harm to vulnerable adults from abuse, neglect, and exploitation utilizing the least restrictive methods.

Our Commitments:

1. Adults have the right to be safe
2. Adults retain all their civil and constitutional rights unless a court adjudicates otherwise
3. Adults have the right to accept or refuse services
4. Adults have the right to make decisions that do not conform with societal norms as long as these decisions do not harm others

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CHAPTER 1: Prevention and Early Intervention

- **OUTCOME STATEMENT: COMMUNITIES WILL HAVE AN UNDERSTANDING AND OWNERSHIP OF PREVENTING AND INTERVENING IN THE PROTECTION OF VULNERABLE ADULTS FROM ABUSE, NEGLECT, OR EXPLOITATION.**
- **Goal Statement: Increase the public's awareness of the role of Adult Protective Services.**

Adult Protective Services Intakes – Past 3 Years

Strengths/Opportunities:

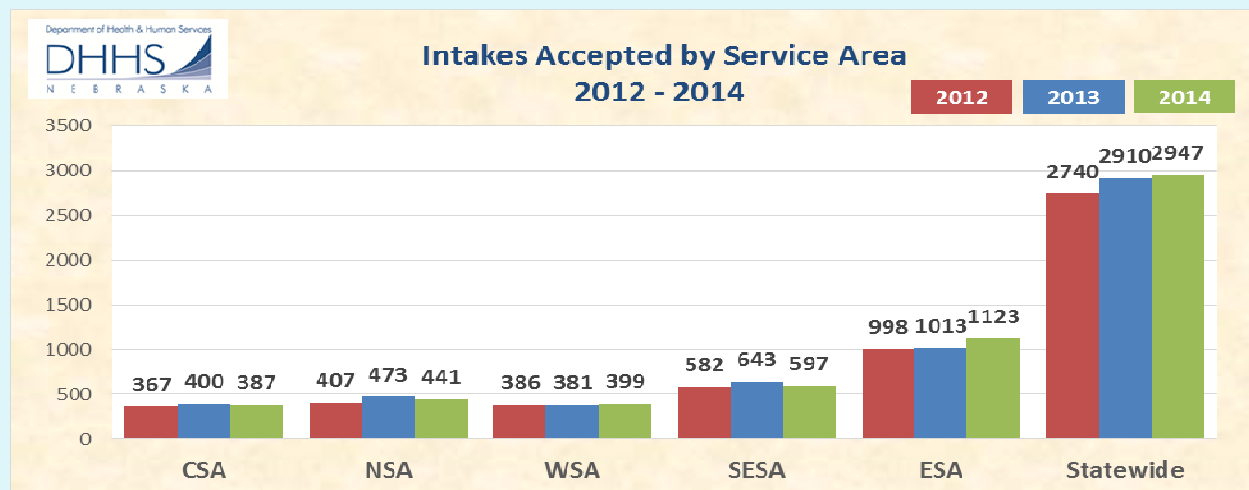
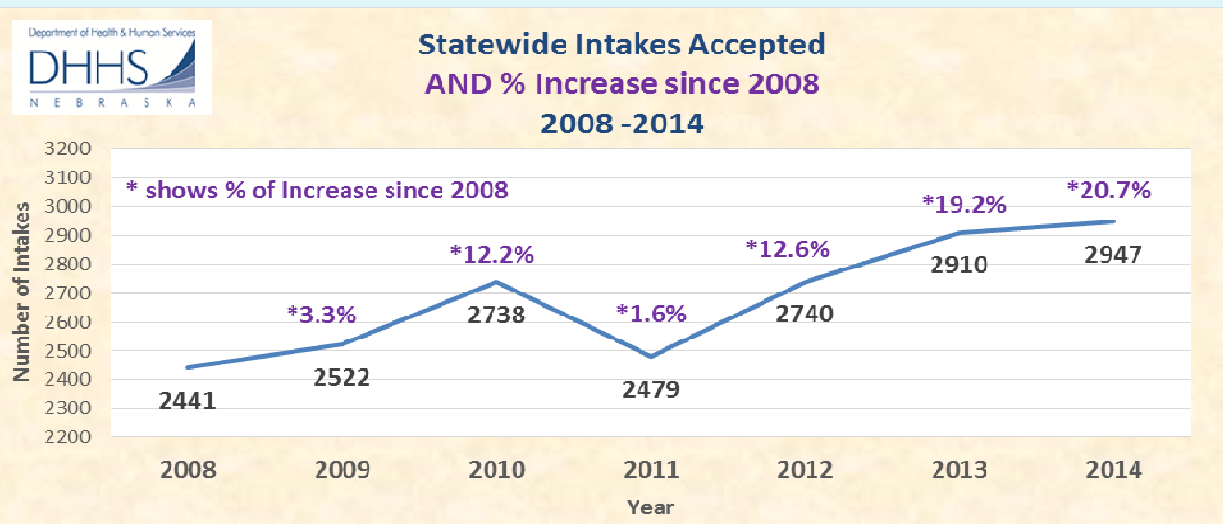
The number of accepted APS intakes has increased each year since 2008.

2014: Overall, there were 37 more intakes accepted than in 2013. Several service areas had a lower number of intakes received in 2014 than in 2013. (CSA, NSA, and SESA).

Barriers:

Action Items:

What are the overall trends of accepted APS intakes over the past 3 years?



Data Review Frequency: Monthly

Adult Protective Services Intakes – Past 3 Months

Strengths/Opportunities:

April 2015: New data on the chart reflecting the percentage of intakes that are accepted for investigation.

Barriers:

Action Items:

Total intakes for the current year (2015):

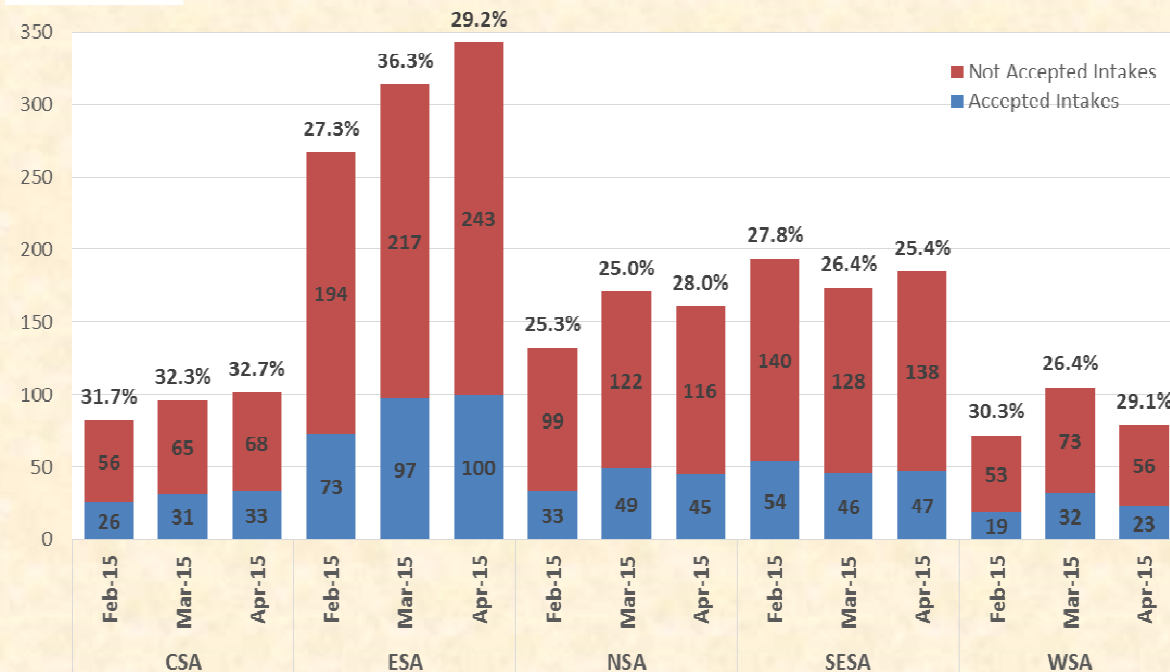
CSA: 119
ESA: 357
NSA: 167
SESA: 189
WSA: 107

Data Review Frequency: Monthly

How many APS intakes are accepted vs. not accepted for each Service Area over the past 3 months?



APS Intakes Per Service Area



The data in this chart represents the number of accepted intakes and not accepted intakes for APS reports for each reporting month. The % at the top of each bar represents the percentage of intakes out of all intakes that were accepted for the reporting month.

This data reflects all the APS Intakes during the reporting month including accepted intakes and intakes not accepted. This data also reflects any multiple reporter intake.

Source: 2015-04 Intake QA Report

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CHAPTER 2: Safety

- **OUTCOME STATEMENT: VULNERABLE ADULTS IN THE ADULT PROTECTION SYSTEM ARE SAFE.**
- Goal Statement #1: Adult protection and safety staff are committed to integrating Structured Decision Making into all aspects of work
- Goal Statement #2: Vulnerable adults will receive a timely response from Adult Protective Services
- Goal Statement #3: Adult Protective Services ensure the safety and dignity of vulnerable adults using the least restrictive interventions

Intake Calls / Responses – All Calls & APS Breakout

Strengths/Opportunities:

April 2015: Higher number of calls overall for the month, with 91% being answered within timeframe expectations.

APS Investigation calls increased again from 818 (13.1%) in March 2015 to 997 (15.0%) in April 2015

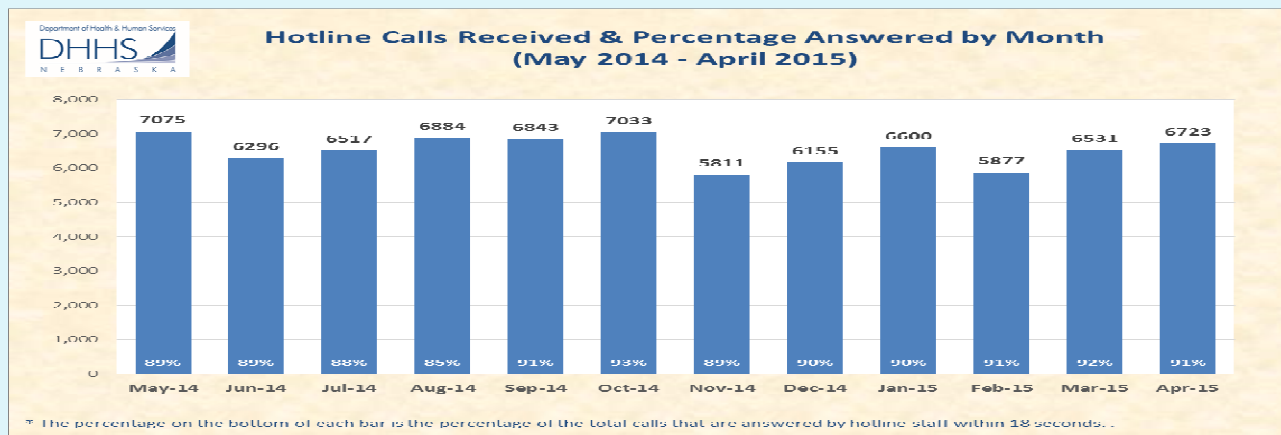
Barriers:

Action Items:

Definitions for each type of call are below the chart.

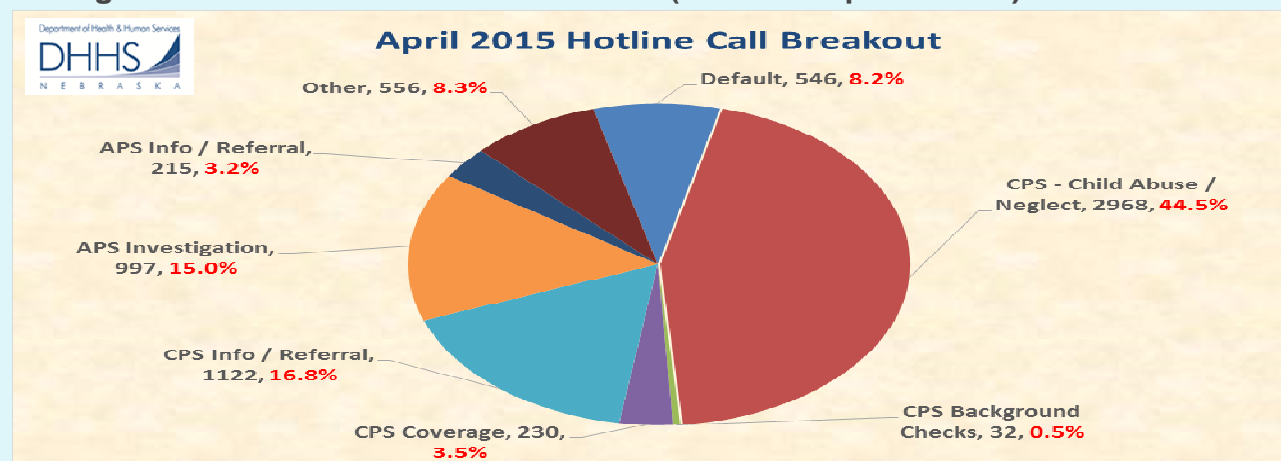
Data Review Frequency: Monthly

What percentage of all hotline calls received each month are answered by hotline staff within the expected timeframe of 18 seconds? (12 month period)



This data includes all APS and CPS calls to the Hotline.

What percentage of hotline calls answered each month were APS Abuse and Neglect calls or APS Info/Referral calls? (Current Report Month)



APS Info / Referral: Caller wants information or needs a referral to a community resource

APS Investigation: Caller intends to make an APS report

CPS Info / Referral: Caller wants information or needs a referral to a community resource for children

CPS Coverage: Caller needs information on an open case

CPS Background Checks: Requests for background checks to be completed for placement

CPS Child Abuse/Neglect: Caller intends to make a CPS report

Default: Calls not coded into the Line of Business system

Other: Calls that are general questions that do not fit into any of the other categories and do not generate a report, NFOCUS documentation, or notification to another HHS employee

Intake Quality Measures – APS Only (3 Month Period)

Strengths/Opportunities:

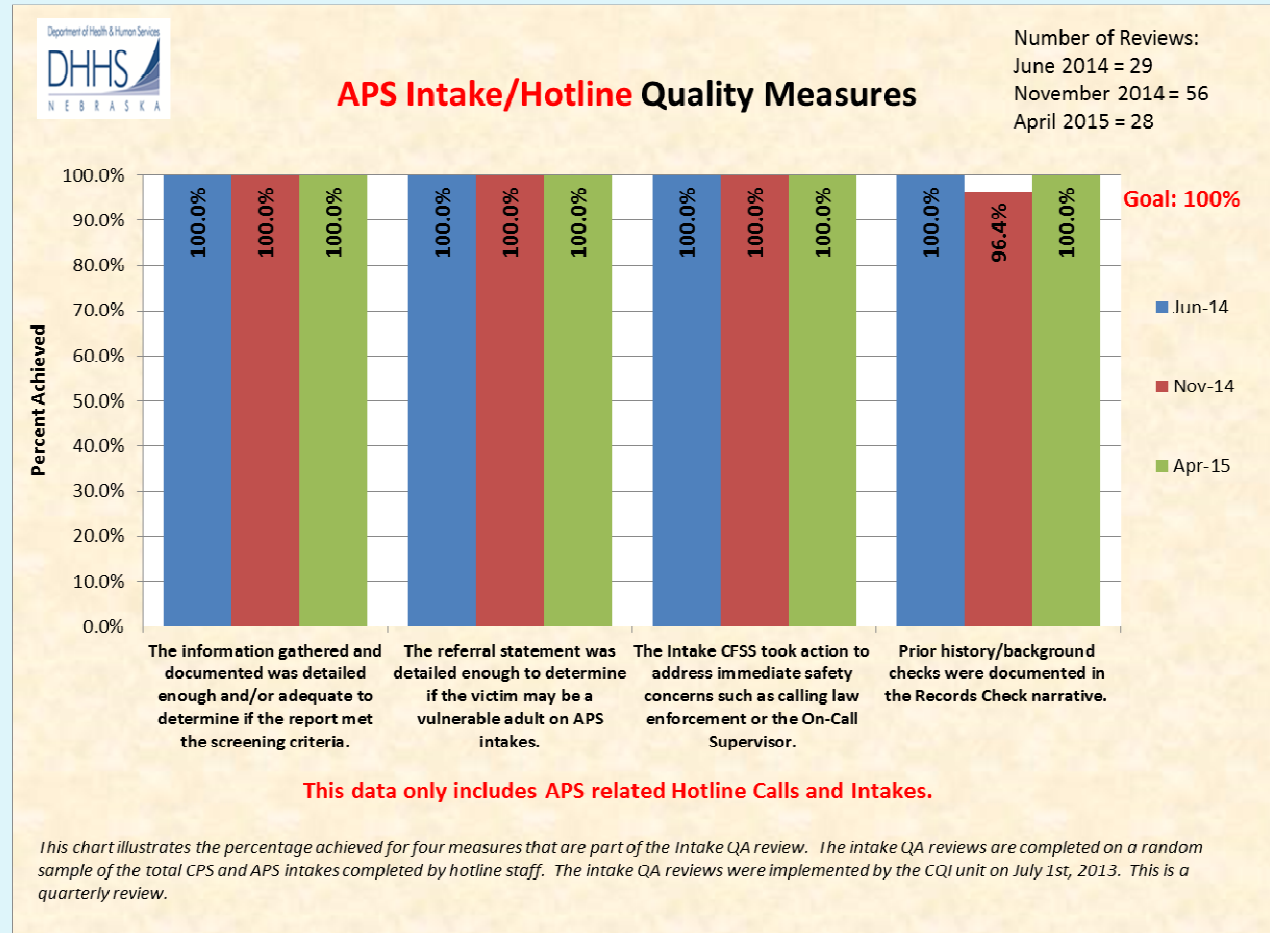
April 2015: Data indicates that APS intakes are received with enough detail to determine if the report met the screening criteria and if the victim may or may not be a vulnerable adult.

Barriers:

Action Items:

Note: This is a quarterly review.

How well does the hotline adhere to expectations established for quality intake decisions?



Data Review Frequency: Quarterly

Adult Protective Services Intakes vs. Vulnerable Adults (6 Month Period)

Strengths/Opportunities:

April 2015: Data now reflects all accepted intakes for the reporting month. Data is shown for previous months to allow sufficient time for a finding to be entered.

Barriers:

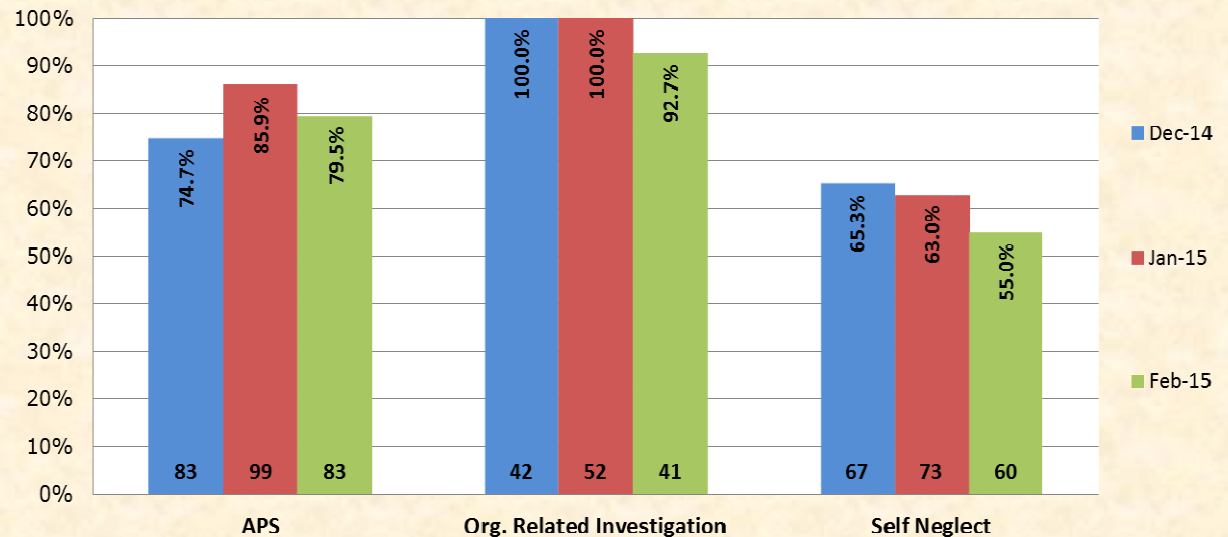
Action Items:

How often are alleged victims found to be “vulnerable adults” on accepted APS, Org. Related, and Self-Neglect intakes?



APS Accepted Intakes vs. Vulnerable Adults

This data reflects all the Accepted APS, ORI, and Self-Neglect intakes for the reporting month.



Month:	Accepted Intakes	Multiple Reporter	Findings Not Entered
Dec-14	207	15	10
Jan-15	243	19	13
Feb-15	192	8	9

This graph represents the percentage of adults who were found to be vulnerable on accepted APS intakes. The data is split out by intake type over a 3 month period.

The chart to the left shows the number of accepted intakes each month, and also how many intakes were listed as "Multiple Reporter" and "Findings Not Entered."

Vulnerable Adult: NRS (28-371): Vulnerable adult shall mean any person eighteen years of age or older who has a substantial mental or functional impairment or for whom a guardian has been appointed under the Nebraska Probate Code.

Data Review Frequency: Monthly

APS Face to Face Contact Timeframes (3 Month Period)

Strengths/Opportunities:

February 2015: P1 timeframes dropped due to one missed contact timeframe.

March 2015: 100% face to face contacts for P1's and P3's, with P2's dropping slightly statewide.

April 2015: Slight decrease in P3 face to face time frames, while P1 and P2 remained consistent.

Barriers:

Action Items:

Note: Exceptions to face to face contacts are not reflected in the charts.

This data is measured for intakes accepted in April 2015.

Is face to face contact with an alleged victim occurring with established priority time frames?



Data Review Frequency: Monthly

Note: Measures are from the APS Performance Accountability report on Infoview. Source: 2015 – 04 APS Performance Accountability

APS Investigation Timeframes— In Ready for Review Status (3 Month period)

Strengths/Opportunities:

February 2015: Increase in P1 and P2 timeframes for ready for review status and slight decrease for P3 timeframes.

March 2015: Slight decrease in P1's and P2's into ready for review status, with an increase in P3's.

April 2015: Increase for P1 and P2 intakes with a slight decrease for P3 investigations in ready for review status.

Barriers:

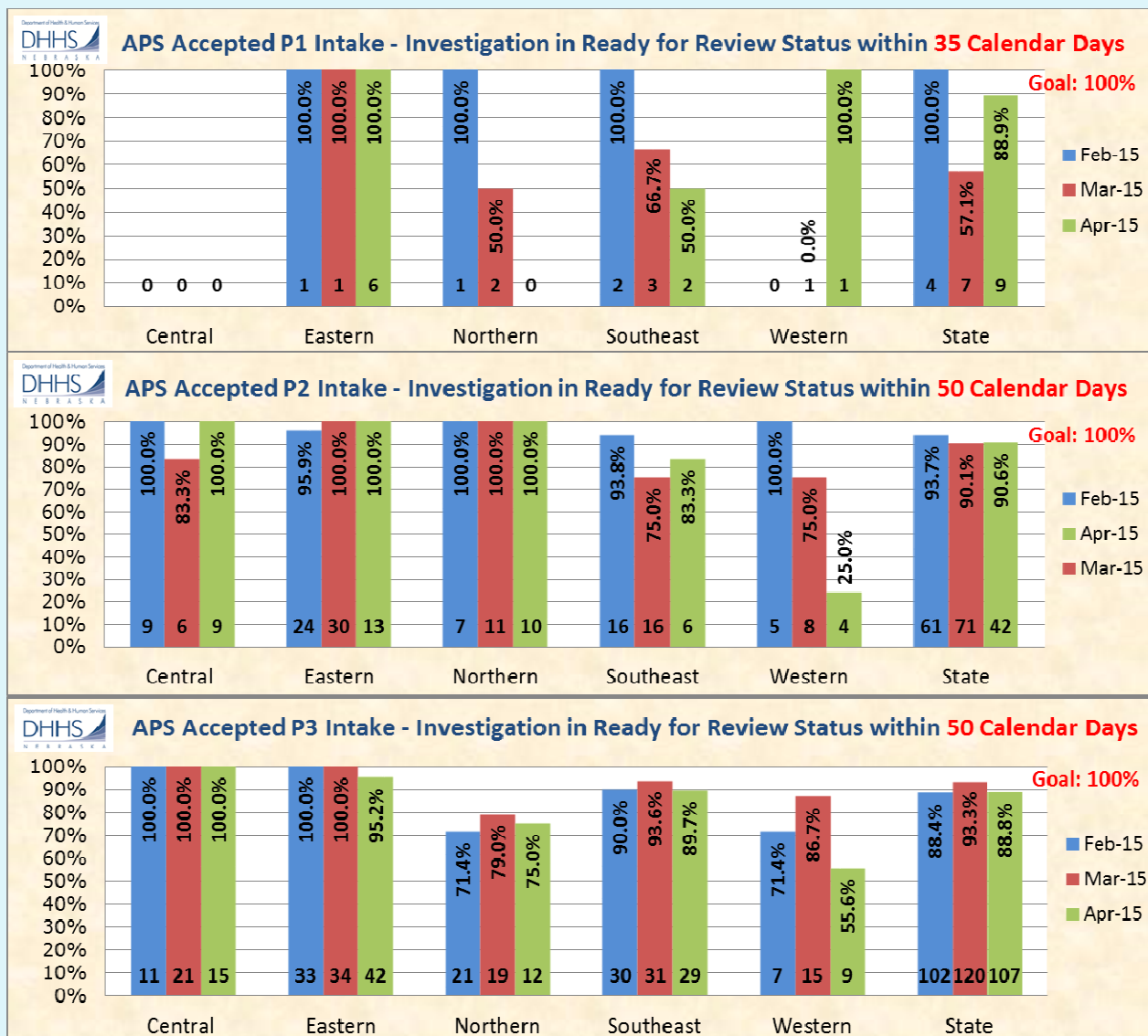
Financial exploitation cases are considered a barrier to achieving this measure due to the time requirements involved in that type of investigation.

Action Items:

Note: Exceptions to finalization timeframes are not reflected in the charts.

This data is measured for intakes accepted in February 2015.

Is the APS worker submitting their draft APS Investigation to their supervisor for review within the expected timeframes?



Data Review Frequency: Monthly

Note: Measures are from the APS Performance Accountability report on Infoview. Source: 2015 – 04 APS Performance Accountability

APS Investigation Timeframes— In Final Status from Ready for Review (3 Month Period)

Strengths/Opportunities:

February 2015: P2 and P3 timeframes dropped a bit for the SESA. P1's remain at 100%.

March 2015: Decrease in all three priority time frames for investigations finalized in 10 calendar days.

April 2015: Decrease in P2 finalizations within 10 days of ready for review, with an increase in P1 and P3 intakes.

Barriers:

Action Items:

Note: Exceptions to finalization timeframes are not reflected in the charts.

This data is measured for intakes accepted in February 2015.

Is the APS investigation finalized by the APS Supervisor within 10 calendar days after it is submitted by the worker?



Data Review Frequency: Monthly

Note: Measures are from the APS Performance Accountability report on Infoview. Source: 2015 – 04 APS Performance Accountability

APS Investigation Timeframes – In Final Status from Intake (3 Month Period)

Strengths/Opportunities:

February 2015: Slight decrease in P2 and P3 finalization timeframes in the SESA.

March 2015: Slight decrease in P1 finalization time frames, with increase in P2 and P3 time frames.

April 2015: Increase in all areas for finalizing intakes within the correct priority time frames!

Barriers:

Action Items:

Note: Exceptions to finalization timeframes are not reflected in the charts.

This data is measured for intakes accepted in February 2015.

Are APS investigations finalized within priority timeframes after the intake was accepted?



Data Review Frequency: Monthly

Note: Measures are from the APS Performance Accountability report on Infoview. Source: 2015 - 04 APS Performance Accountability

Monthly Contact – Open APS Cases (Current Report Month)

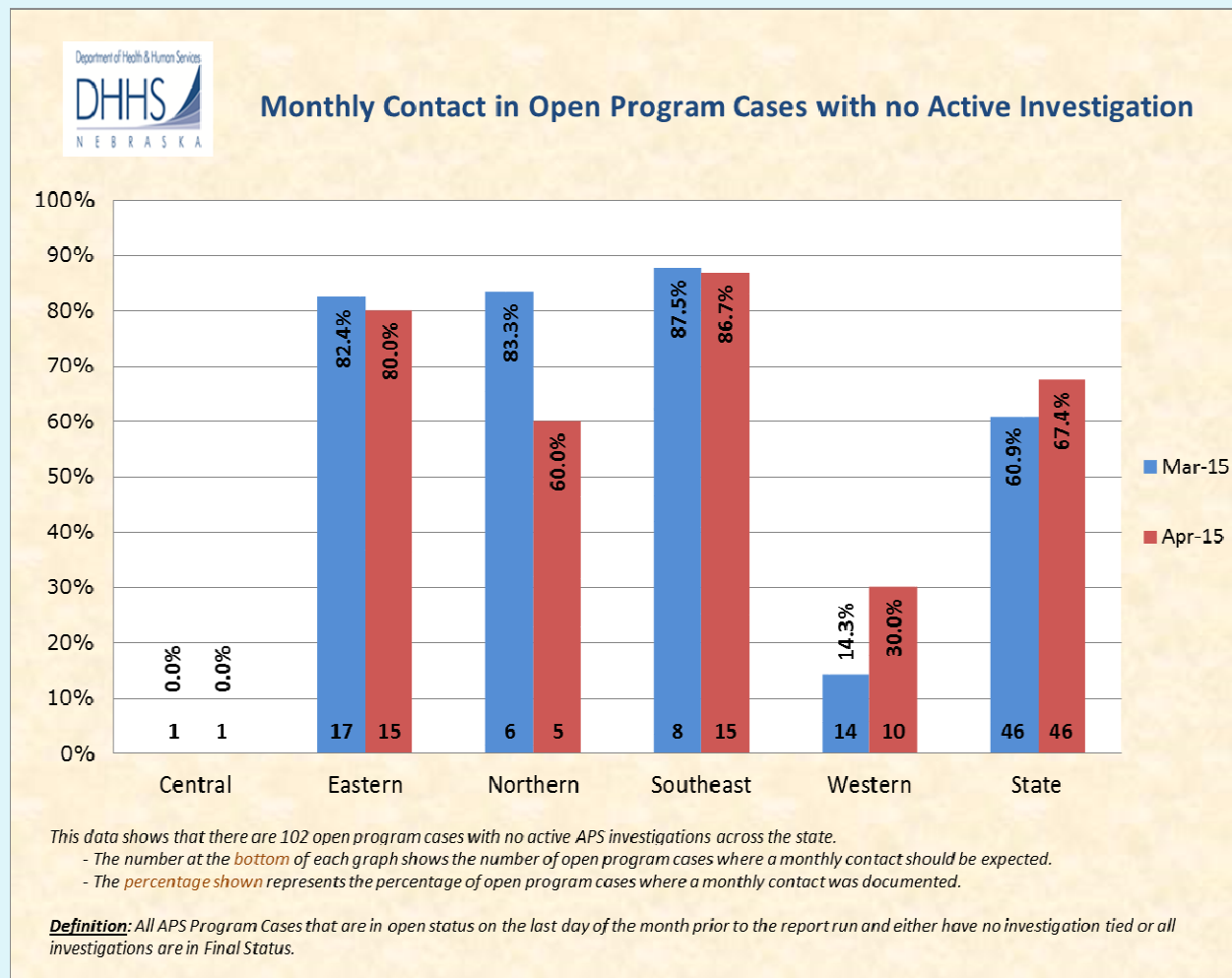
Strengths/Opportunities:

April 2015: The monthly contact expectations for the state stayed the same at 46 open program cases, but a higher percentage of contacts were documented for April 2015.

Barriers:

Action Items:

Is monthly contact being documented on open APS program cases with no current investigation.



Performance Standard: In open program cases with no investigation tied or all investigations in final status, the expectation is one documented face to face contact with the adult(s) per month.

Note: Measures are from the APS Performance Accountability report on Infoview. Source: 2015 - 02 APS Performance Accountability

Data Review Frequency: Monthly

APS Quality Measures – Statewide (6 Month Period)

Strengths/Opportunities:

September 2014: Many items remained consistent. Decreases in supporting the maltreatment and safety sections statewide.

October 2014: 3 out of 5 measures remained steady, while 2 increased statewide.

November 2014: 3 out of 5 measures decreased, while two measures increased for the state.

December 2014: 3 measures at 100% and increases in all 5 measures!

January 2015: Decrease in two measures, with an increase in the Safety Response area!

February 2015: Four measures remained steady with one slight decrease in one measure.

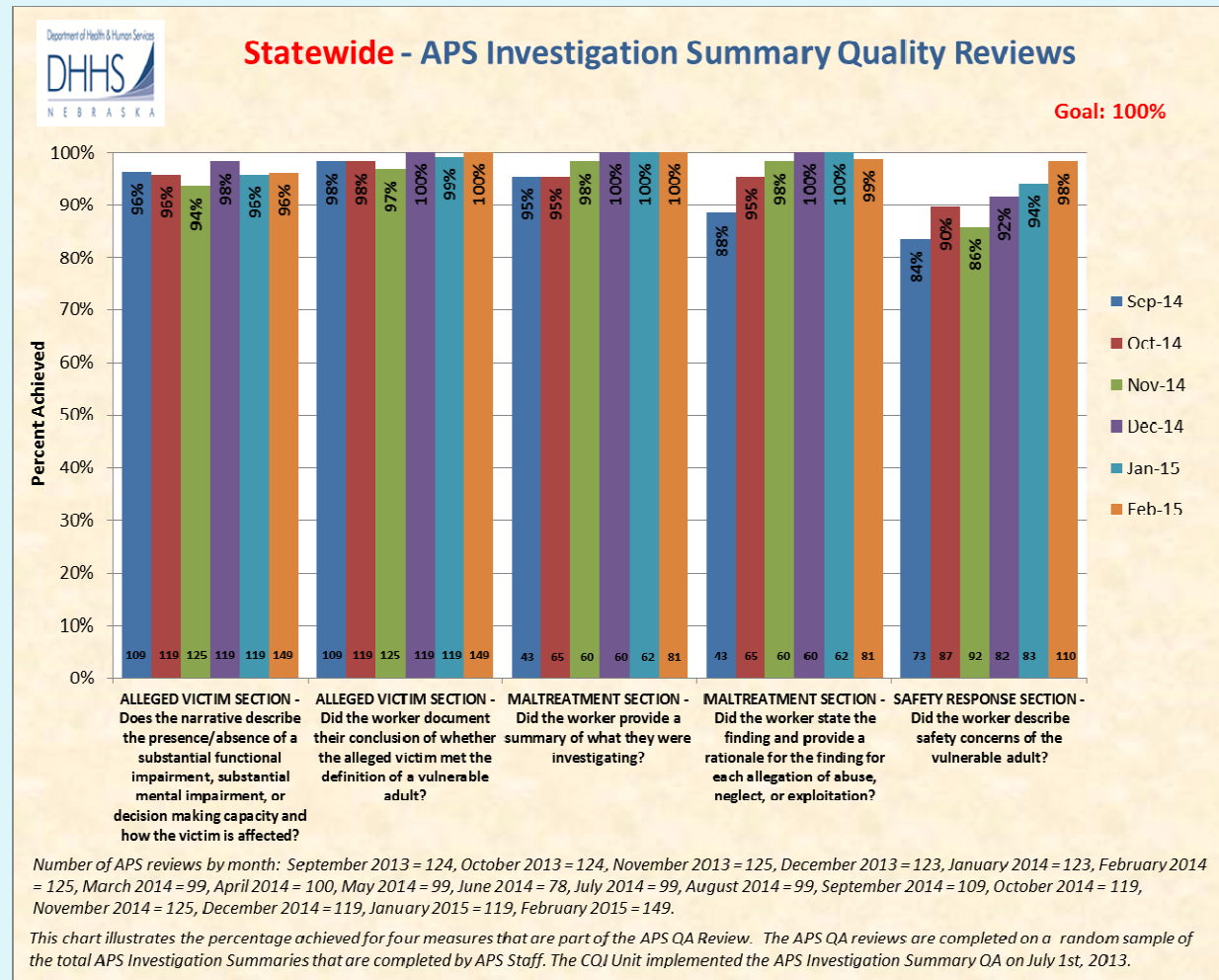
Barriers:

Action Items:

Note: Service Area charts were removed from the following pages in March 2015. No new data for April 2015.

Data Review Frequency: Monthly

Does the APS Investigation Summary contain sufficient information to support decisions made during the investigation?



Note: Measure is from CQI reviews of the APS investigation summary. Random samples from each service area are selected and reviewed on a monthly basis.

CHAPTER 3: Workforce Stability

- **OUTCOME STATEMENT: THE ADULT PROTECTIVE SERVICES' WORKFORCE IS WELL-QUALIFIED, TRAINED, SUPERVISED, AND SUPPORTED.**
- **Goal Statement #1: Reduce staff turnover**
- **Goal Statement #2: Provide for ongoing training for staff that addresses the skill and knowledge base needed to carry out their duties**
- **Goal Statement #3: Supervisory staff will be well trained and provide overall leadership for workers**

APS Intake Trends by Service Area (Past 12 Months)

Strengths/Opportunities:

April 2015: CSA, ESA, & WSA have declining trend lines, while NSA has an increasing trend line. SESA remains fairly consistent for the past 12 months.

Barriers:

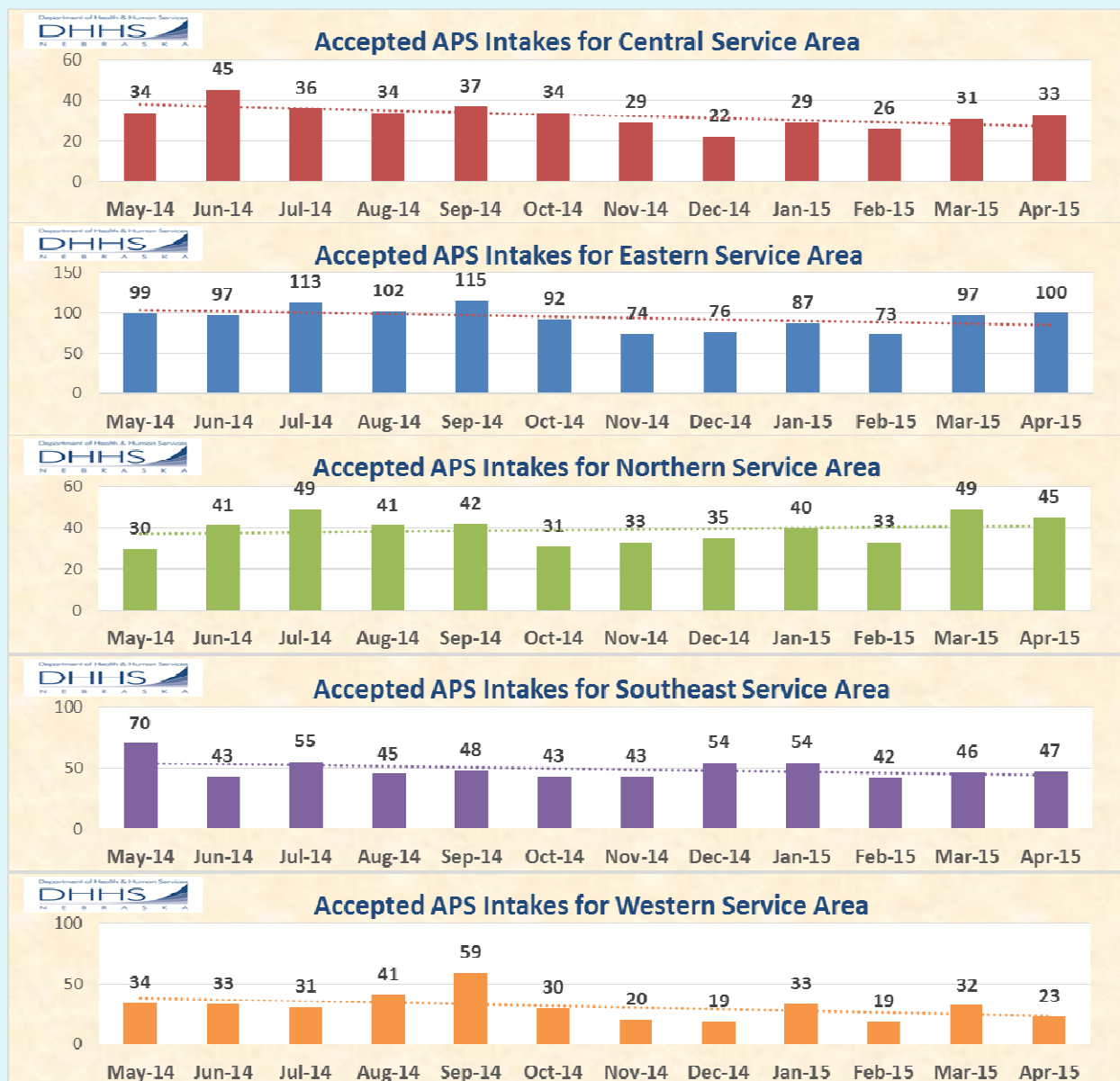
Action Items:

This data includes multiple reporter intakes.

Source: 2015-04 Intake QA Report

Data Review Frequency: Monthly

What are the current trends for accepted Adult Protective Services intakes for each Service Area for the past 12 months?



APS Staff Vacancy Rate (6 Month Period)

Strengths/Opportunities:

Barriers:

Action Items:

**Planned:* In the future, APS Staff could have their own classification.

How many APS positions were available for a full case load and how many positions were in Trainee status in a given month?

APS Positions (Full Case Load) by Service Area						
	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15
CSA	4/4, 100%	4/4, 100%				
ESA	10/11, 90.9%	11/11, 100%				
NSA	5/5, 100%	5/5, 100%				
SESA	6/7, 85.7%	7/7, 100%				
WSA	3/4, 75.0%	4/4, 100%				
Total	28/31, 90.3%	31/31, 100%				

APS Positions (Trainee Status) by Service Area						
	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15
CSA	0/5, 0.0%	0/4, 0.0%				
ESA	1/11, 9.1%	0/11, 0.0%				
NSA	0/5, 0.0%	0/5, 0.0%				
SESA	1/7, 14.3%	0/7, 0.0%				
WSA	1/4, 25.0%	0/4, 0.0%				
Total	3/31, 9.7%	0/31, 0.0%				

Data Review Frequency: Monthly

Source: Self-Report from all the Adult Protective Services Supervisors.

Average Investigation Per APS Worker Per Month

Strengths/Opportunities:

The average number of APS intakes per worker per month increased slightly from 2012 to 2013.

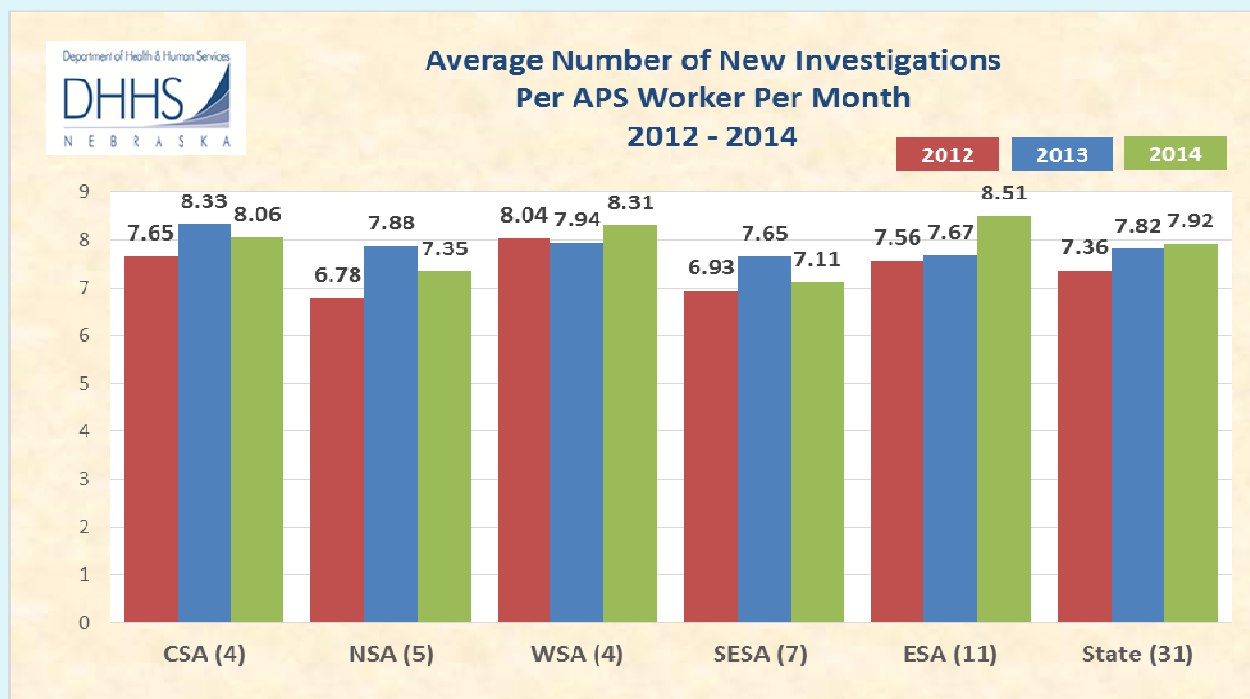
2014: The average number of intakes per worker increased from 2013, but several service areas decreased.

Barriers:

Action Items:

Note: The number next to each service area represents the total allotted positions for the current year (2014).

On average, how many investigations were completed by APS workers in each Service Area and how many of those investigations were for Self Neglect, APS, or Org. Related Intakes?



Average Number of New Investigations Per Worker Per Month - 2014			
	Self Neglect	APS Investigation	ORG Related
CSA	3.5	2.9	1.2
NSA	2.3	3.1	1.3
WSA	3.1	3.5	1.1
SESA	2.4	2.9	1.3
ESA	2.1	4.1	1.8

This data only represents new investigations. It does not reflect the number of ongoing cases managed by APS.

Data Review Frequency: Monthly

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